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| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | Chapter 7                       |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ☐ Chapter 13                    | Check if this an amended filing |

B 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | Identify Yourself   |  |  |
|-----|---|--|--|
|     |   | About Debtor 1:                                | About Debtor 2 (Spouse Only in a Joint Case):  |
| 1.  | Your full name  |  |  |
|     | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture | Peter First name Middle name                   | Diana First name  Jo Middle name               |
|     | identification to your meeting with the trustee.  | Gangl Last name and Suffix (Sr., Jr., II, III) | Gangl Last name and Suffix (Sr., Jr., II, III) |
| 2.  | All other names you have used in the last 8 years   |  |  |
|     | Include your married or maiden names.   |  |  |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)                             | xxx-xx-9039                                    | xxx-xx-2967                                    |

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Debtor 1 Peter Gangl
Debtor 2 Diana Jo Gangl

Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ■ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 1308 Henry Ave Des Plaines, IL 60016  Number, Street, City, State & ZIP Code  Cook  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | <ul> <li>Check one:</li> <li>■ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> <li>□ I have another reason.         Explain. (See 28 U.S.C. § 1408.)     </li> </ul>  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  □ I have another reason. Explain. (See 28 U.S.C. § 1408.)   |

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|     | otor 1<br>otor 2       | Peter Gangl<br>Diana Jo Gangl   |                           |          | Dodan   |  | Case number (if known)   |          |
|-----|------------------------|---|---------------------------|----------|---|--|--|----------|
| Par | t 2:                   | Tell the Court About \  | rour Bankru               | ptcy Ca  | ase   |  |  |          |
| 7.  | The d                  | chapter of the cruptcy Code you are   | Check one.                | For a l  | orief description   | of each, see <i>Notice Required by</i> page 1 and check the appropria                                    | 11 U.S.C. § 342(b) for Individuals Filing for Bank<br>te box.  | ruptcy   |
|     | choo                   | sing to file under  | ■ Chapter                 | 7        |   |  |  |          |
|     |                        |   | ☐ Chapter                 | 11       |   |  |  |          |
|     |                        |   | ☐ Chapter                 | 12       |   |  |  |          |
|     |                        |   | ☐ Chapter                 | 13       |   |  |  |          |
| 8.  | How                    | you will pay the fee  | about<br>order            | how your | ou may pay. Typi  | cally, if you are paying the fee y   | ck with the clerk's office in your local court for mo<br>ourself, you may pay with cash, cashier's check,<br>half, your attorney may pay with a credit card or cl  | or money |
|     |                        |   |                           |          |   | allments. If you choose this optics (Official Form 103A).  | on, sign and attach the Application for Individuals  | s to Pay |
|     |                        |   | ☐ I request but is that a | not rec  | at my fee be wai<br>juired to, waive y<br>o your family siz | ved (You may request this optic<br>our fee, and may do so only if you<br>e and you are unable to pay the | on only if you are filing for Chapter 7. By law, a jud<br>our income is less than 150% of the official pover<br>fee in installments). If you choose this option, you<br>(Official Form 103B) and file it with your petition. | ty line  |
| 9.  |                        | you filed for   | ■ No.                     |          |   |  |  |          |
|     |                        | ruptcy within the<br>3 years?   | ☐ Yes.                    |          |   |  |  |          |
|     | last 8 y               |   | 1                         | District |   | When   | Case number  |          |
|     |                        |   | 1                         | District |   | When   | Case number  |          |
|     |                        |   | 1                         | District | -   | When   | Case number  |          |
| 10. |                        | nny bankruptcy<br>s pending or being  | ■ No                      |          |   |  |  |          |
|     | filed<br>not f<br>you, | by a spouse who is<br>iling this case with<br>or by a business<br>ner, or by an | ☐ Yes.                    |          |   |  |  |          |
|     |                        |   | 1                         | Debtor   |   |  | Relationship to you  |          |
|     |                        |   | 1                         | District |   | When   | Case number, if known  |          |
|     |                        |   | ı                         | Debtor   |   |  | Relationship to you  |          |
|     |                        |   | 1                         | District |   | When   | Case number, if known  |          |
| 11. |                        | ou rent your  | □ No.                     | Go to l  | ine 12.   |  |  |          |
|     | resid                  | lence?  | Yes.                      | Has yo   | our landlord obtain   | ined an eviction judgment again:   | st you and do you want to stay in your residence?  | ı        |
|     |                        |   |                           | •        | No. Go to line 1  | 2.   |  |          |
|     |                        |   |                           |          | Yes. Fill out <i>Init</i> bankruptcy peti                   |  | Judgment Against You (Form 101A) and file it wi  | th this  |

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|  | otor 1 Peter Gangl otor 2 Diana Jo Gangl  |   | Docum   | Case number (if known)  |  |  |
|--|---|---|---|---|--|--|
|  |   |   |   |   |  |  |
| Par  | Report About Any Bu   | sinesses  | You Own as a Sole Proprie                           | tor   |  |  |
| 12.  | Are you a sole proprietor of any full- or part-time business?   | ■ No.   | Go to Part 4.                                       |   |  |  |
|  |   | ☐ Yes.  | Name and location of but                            | siness  |  |  |
|  | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |   | Name of business, if any                            |   |  |  |
| If you have more than one sole proprietorship, use a separate sheet and attach  Number, Street, City, State & ZIP Code |   |   |   | ite & ZIP Code  |  |  |
| it to this petition.   |   |   |   | ox to describe your business:   |  |  |
|  |   |   |   | ness (as defined in 11 U.S.C. § 101(27A))   |  |  |
|  |   |   |   | I Estate (as defined in 11 U.S.C. § 101(51B))   |  |  |
|  |   |   | ☐ Stockbroker (as o                                 | defined in 11 U.S.C. § 101(53A))  |  |  |
|  |   |   |   | er (as defined in 11 U.S.C. § 101(6))   |  |  |
|  |   |   | ☐ None of the above                                 | e   |  |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of eand are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure |   |   |  |  |
|  | For a definition of small   | ■ No.   | I am not filing under Cha                           | pter 11.  |  |  |
|  | business debtor, see 11 U.S.C. § 101(51D).  | □ No.   | I am filing under Chapter Code.                     | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |  |  |
|  |   | ☐ Yes.  | I am filing under Chapter                           | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |  |  |
| Par  | t 4: Report if You Own or   | Have Any  | / Hazardous Property or An                          | y Property That Needs Immediate Attention   |  |  |
| 14.  | Do you own or have any  | ■ No.   |   |   |  |  |
|  | property that poses or is alleged to pose a threat  | ☐ Yes.  |   |   |  |  |
|  | of imminent and identifiable hazard to  | □ res.  | What is the hazard?                                 |   |  |  |
|  | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |   | If immediate attention is needed, why is it needed? |   |  |  |
|  | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |   | Where is the property?                              |   |  |  |
|  | - •   |   |   | Number, Street, City, State & Zip Code  |  |  |
|  |   |   |   |   |  |  |

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Debtor 1 **Peter Gangl** Debtor 2 Diana Jo Gangl Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### 15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or

making rational decisions about finances.

My physical disability causes Disability. П

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

П Active duty. I am currently on active

military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

Incapacity. I have a mental illness or a mental

> deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to Disability. be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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|      | tor 1<br>tor 2                                   | Peter Gangl<br>Diana Jo Gangl  |   | Doddinone   | Case no   | number (if known)  |          |
|------|--|--|---|---|---|--|----------|
| Part | 6:   | Answer These Questi  | ons for Repo  | orting Purposes   |   |  |          |
|      | Wha  | t kind of debts do<br>nave?  | 16a. Ar   | re your debts primarily consundividual primarily for a personal,  No. Go to line 16b.   |   | re defined in 11 U.S.C. § 101(8) as "incurre   | ed by an |
|      |  |  | 16b. Ar   | Yes. Go to line 17.  Ye your debts primarily busines oney for a business or investment No. Go to line 16c.  Yes. Go to line 17. |   | debts that you incurred to obtain he business or investment.   |          |
|      |  |  | 16c. St   | ate the type of debts you owe the   | at are not consumer debts or bu   | pusiness debts   |          |
| 17.  |  | ou filing under<br>oter 7?   | □ No. I a   | nm not filing under Chapter 7. Go   | to line 18.   |  |          |
|      | after<br>prop<br>admi<br>are p<br>be av<br>distr | ou estimate that<br>any exempt<br>erty is excluded and<br>inistrative expenses<br>vaid that funds will<br>vailable for<br>ibution to unsecured<br>itors? | ex  | nm filing under Chapter 7. Do you<br>penses are paid that funds will b<br>No<br>I Yes   |   | pt property is excluded and administrative ecured creditors?   |          |
| 18.  |  | many Creditors do estimate that you  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999               |   | ☐ 1,000-5,000<br>☐ 5001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000  |          |
| 19.  | estin  | much do you<br>nate your assets to<br>orth?  | \$0 - \$50,001 - \$500,001 \$500,001                      | - \$100,000<br>- \$500,000  | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | n □ \$10,000,000,001 - \$50 billio   |          |
| 20.  |  | much do you<br>nate your liabilities<br>?  | □ \$0 - \$50,<br>□ \$50,001<br>■ \$100,001<br>□ \$500,001 | - \$100,000<br>- \$500,000  | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | n □ \$10,000,000,001 - \$50 billio   |          |
| Part | 7:   | Sign Below   |   |   |   |  |          |
| For  | you  |  | If I have cho<br>United State                             | sen to file under Chapter 7, I am<br>is Code. I understand the relief a   | aware that I may proceed, if elivailable under each chapter, any or agree to pay someone who                              | e information provided is true and correct. eligible, under Chapter 7, 11,12, or 13 of title ind I choose to proceed under Chapter 7. to is not an attorney to help me fill out this 2(b). | e 11,    |
|      |  |  | I understand  |   | ealing property, or obtaining mo  | noney or property by fraud in connection wit   |          |
|      |  |  | bankruptcy of 1519, and 39 /s/ Peter G                    | 571.  | 50,000, or imprisonment for up to   | to 20 years, or both. 18 U.S.C. §§ 152, 134  | 41,      |
|      |  |  | Peter Gan<br>Signature of                                 | gl  | Diana Jo Ga<br>Signature of D   | Sangl  |          |
|      |  |  | Executed on   | December 17, 2015<br>MM / DD / YYYY   | Executed on   | December 17, 2015<br>MM / DD / YYYY  |          |

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|----------------------|--|---|--------------------------|------------------------|--------------------------------|
| Debtor 1<br>Debtor 2 | Peter Gangl<br>Diana Jo Gangl                  |   | Cas                      | e number (if known)    |                                |
|                      |  |   |                          |                        |                                |
|                      | attorney, if you are<br>red by one             | I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify | ed States Code, and have | explained the relief a | vailable under each chapter    |
|                      | not represented by ey, you do not need s page. | 342(b) and, in a case in which § 707(b)(4)(Ď) in the schedules filed with the petition is income  |                          | no knowledge after a   | n inquiry that the information |
|                      |  | /s/ Thomas C. O'Brien   | Date                     | December 17, 2         | 2015                           |
|                      |  | Signature of Attorney for Debtor  |                          | MM / DD / YYYY         |                                |
|                      |  | Thomas C. O'Brien Printed name  |                          |                        |                                |
|                      |  | Law Offices of Tom O'Brien  |                          |                        |                                |
|                      |  | Firm name   |                          |                        |                                |
|                      |  | 950 Main Street   |                          |                        |                                |
|                      |  | Antioch, IL 60002   |                          |                        |                                |
|                      |  | Number, Street, City, State & ZIP Code  |                          |                        |                                |

Email address

tom@tomobrienlaw.com

Contact phone **847-838-1100** 

**2082322**Bar number & State

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| nation to identify your | case:  |  |   |
|-------------------------|--|--|---|
| Peter Gangl             |  |  |   |
| First Name              | Middle Name                                      | Last Name  |   |
| Diana Jo Gangl          |  |  |   |
| First Name              | Middle Name                                      | Last Name  |   |
| nkruptcy Court for the: | NORTHERN DISTRICT                                | OF ILLINOIS  |   |
|                         |  |  |   |
|                         | Peter Gangl First Name Diana Jo Gangl First Name | First Name Middle Name  Diana Jo Gangl  First Name Middle Name | Peter Gangl  First Name Middle Name Last Name  Diana Jo Gangl  First Name Middle Name Last Name |

☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | 3.4  |  |
|--|--|--|
|  |  | assets<br>of what you own                                    |
| Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$   | 0.00   |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$   | 34,877.00  |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$   | 34,877.00  |
| t2: Summarize Your Liabilities   |  |  |
|  |  | iabilities<br>nt you owe                                     |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$   | 0.00   |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$   | 0.00   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$   | 124,476.00   |
| Your total liabilities   | \$   | 124,476.00   |
| t 3: Summarize Your Income and Expenses  |  |  |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$   | 2,498.97   |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$   | 2,498.00   |
| 4: Answer These Questions for Administrative and Statistical Records   |  |  |
| Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ır other s   | chedules.  |
| ■ Yes What kind of debt do you have?   |  |  |
| t  | 1b. Copy line 62, Total personal property, from Schedule A/B | 1b. Copy line 62, Total personal property, from Schedule A/B |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 Peter Gangl
Debtor 2 Diana Jo Gangl

Debtor 2 Diana Jo Gangl

Description Decomposition Dec

Pebtor 2 Diana Jo Gangl Case number (if known)

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 3,658.47

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Tota | al claim  |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following:   |      |           |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_  | 0.00      |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_  | 0.00      |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$_  | 0.00      |
| 9d. Student loans. (Copy line 6f.)   | \$_  | 33,915.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_  | 0.00      |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$_ | 0.00      |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$   | 33,915.00 |

Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main Document Page 10 of 47 Fill in this information to identify your case and this filing: Debtor 1 **Peter Gangl** Middle Name Last Name First Name Debtor 2 Diana Jo Gangl (Spouse, if filing) Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number ☐ Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put Mercury Who has an interest in the property? Check one. 3.1 Make: the amount of any secured claims on Schedule D: Villager Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2001 Year: Debtor 2 only Current value of the Current value of the 130000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$2,400.00 \$2,400.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **Toyota** Who has an interest in the property? Check one. 3.2 Make: the amount of any secured claims on Schedule D: Scion XA Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2006 Year: Debtor 2 only Current value of the Current value of the 88000 Approximate mileage: ■ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$4,275.00 \$4,275.00 ☐ Check if this is community property (see instructions)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

■ No

☐ Yes

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| Debtor 1<br>Debtor 2             | Peter Gangl<br>Diana Jo Ga                           |   | mber (if known)   |
|----------------------------------|--|---|---|
|                                  |  | the portion you own for all of your entries from Part 2, including any entried for Part 2. Write that number here             |   |
| Part 3: De                       | escribe Your Perso                                   | nal and Household Items   |   |
| Do you ov                        | wn or have any l                                     | egal or equitable interest in any of the following items?   | Current value of the portion you own? Do not deduct secure claims or exemptions |
| Examp.<br>□ No                   | nold goods and f<br>les: Major appliar<br>. Describe | furnishings<br>nces, furniture, linens, china, kitchenware  |   |
|                                  |  | Furnishings and Appliances  | \$1,000   |
| □ No                             | les: Televisions a                                   | and radios; audio, video, stereo, and digital equipment; computers, printers, scan<br>I phones, cameras, media players, games | anners; music collections; electronic devic                                     |
| _ 100.                           | . Doddibo  | TV's, Stereos, DVD Player, Computer, Tablet   | \$500   |
| Examp                            |  | I figurines; paintings, prints, or other artwork; books, pictures, or other art objects<br>ons, memorabilia, collectibles     | cts; stamp, coin, or baseball card collectio                                    |
| _ 100.                           | . Doddibo  | Books, Personal Pictures, CDs, DVDs, Etc.   | \$100   |
| Examp.  ■ No □ Yes.  10. Fireari | musical instruction  Describe  ms                    | ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs,   | s, skis; canoes and kayaks; carpentry too                                       |
|                                  | Describe   |   |   |
| □ No                             |  | othes, furs, leather coats, designer wear, shoes, accessories   |   |
| . 55.                            | 2000   | Clothes and Shoes   | \$100   |
| □ No                             |  | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, wate   | atches, gems, gold, silver  |
|                                  |  |   |   |
| Exam <sub>l</sub><br>□ No<br>□   | arm animals ples: Dogs, cats, Describe               | birds, horses   |   |
| <del>-</del> 168.                | . Describe   | 1 Cat   |   |

Entered 12/17/15 10:30:15 Case 15-42455 Doc 1 Filed 12/17/15 Desc Main Page 12 of 47 Document Debtor 1 **Peter Gangl** Debtor 2 Diana Jo Gangl Case number (if known) 14. Any other personal and household items you did not already list, including any health aids you did not list ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.801.00 for Part 3. Write that number here ...... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Checking and Savings Account with First** American Bank \$500.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: Yes..... Sharebuilder \$3,800.00 **Scotttrade** \$2,600.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No ■ Yes. Give specific information about them..... Name of entity: % of ownership: BR4U2 - Ebay/Online Sales of Books and Media 100 \$1.00 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401k Account with Former Employer \$18,000.00

401k Account with Employer

\$1.000.00

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### 31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

■ No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

#### 32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

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Official Form 106A/B Schedule A/B: Property page 5

\$34,877.00

Copy personal property total

62. Total personal property. Add lines 56 through 61...

\$34,877.00

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Debtor 1 Peter Gangl
Debtor 2 Diana Jo Gangl Case number (if known)

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$34,877.00

Official Form 106A/B

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Page 16 of 47 Document Fill in this information to identify your case: Debtor 1 **Peter Gangl** Middle Name Last Name First Name Debtor 2 Diana Jo Gangl (Spouse if, filing) Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from |          | ount of the exemption you claim  ck only one box for each exemption.        | Specific laws that allow exemption |
|---|--|----------|---|------------------------------------|
| 2001 Mercury Villager 130000 miles<br>Line from <i>Schedule A/B</i> : 3.1           | \$2,400.00   | •        | \$2,400.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c)              |
| 2006 Toyota Scion XA 88000 miles<br>Line from Schedule A/B: 3.2                     | \$4,275.00   | <b>■</b> | \$2,400.00<br>100% of fair market value, up to                              | 735 ILCS 5/12-1001(c)              |
| 2006 Toyota Scion XA 88000 miles<br>Line from <i>Schedule A/B</i> : <b>3.2</b>      | \$4,275.00   | ■<br>□   | \$1,875.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
| Furnishings and Appliances Line from Schedule A/B: 6.1                              | \$1,000.00   |          | \$1,000.00  100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b)              |
| TV's, Stereos, DVD Player, Computer, Tablet Line from Schedule A/B: 7.1             | \$500.00   | ■<br>□   | \$500.00  100% of fair market value, up to any applicable statutory limit   | 735 ILCS 5/12-1001(b)              |

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**Peter Gangl** Debtor 1 Debtor 2 Diana Jo Gangl Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Books, Personal Pictures, CDs, 735 ILCS 5/12-1001(b) \$100.00 \$100.00 DVDs, Etc. Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit **Clothes and Shoes** 735 ILCS 5/12-1001(a) \$100.00 \$100.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Wedding Bands** 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit 1 Cat 735 ILCS 5/12-1001(b) \$1.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Sharebuilder 735 ILCS 5/12-1001(b) \$3.800.00 \$3,800.00 Line from Schedule A/B: 18.1 П 100% of fair market value, up to any applicable statutory limit Scotttrade 735 ILCS 5/12-1001(b) \$623.00 \$2,600.00 Line from Schedule A/B: 18.2 П 100% of fair market value, up to any applicable statutory limit BR4U2 - Ebay/Online Sales of Books 735 ILCS 5/12-1001(b) \$1.00 \$1.00 and Media П 100 % ownership 100% of fair market value, up to Line from Schedule A/B: 19.1 any applicable statutory limit 401k Account with Former Employer 735 ILCS 5/12-1006 \$18,000,00 \$18,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401k Account with Employer 735 ILCS 5/12-1006 \$1,000.00 \$1,000.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? П No

П

Yes

Document Fill in this information to identify your case: Debtor 1 **Peter Gangl** Middle Name First Name Last Name Debtor 2 **Diana Jo Gangl** (Spouse if, filing) Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main Page 19 of 47 Document Fill in this information to identify your case: Debtor 1 **Peter Gangl** Middle Name Last Name First Name Debtor 2 Diana Jo Gangl (Spouse if, filing) Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 5,147.00 4.1 Capital One Na 6148 Last 4 digits of account number

Nonpriority Creditor's Name Opened 11/01/08 Last Attn: General Correspondence Po Box 30285 When was the debt incurred? Active 2/14/15 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify Capital One 0710 4.889.00 Last 4 digits of account number

Nonpriority Creditor's Name

Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Number Street City State Zlp Code

When was the debt incurred?

Opened 3/01/07 Last Active 1/15/15

As of the date you file, the claim is: Check all that apply

Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main Page 20 of 47 Document Debtor 1 **Peter Gangl** Debtor 2 Diana Jo Gangl Case number (if know) Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.3 6,596.00 Chase Card Last 4 digits of account number 2473 \$ Nonpriority Creditor's Name Opened 10/01/10 Last 201 N. Walnut St//De1-1027 When was the debt incurred? Active 1/07/15 Wilmington, DE 19801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated □ Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 20.000.00 Chase Mtg 6545 Last 4 digits of account number \$ Nonpriority Creditor's Name Opened 3/24/12 Last Po Box 24696 When was the debt incurred? Active 12/17/13 Columbus, OH 43224 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed ■ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? lacksquare Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Real Estate Mortgage Deficiency** Other. Specify

Citibank Sd, Na Nonpriority Creditor's Name

Last 4 digits of account number

3414

6,705.00

4.5

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|     | 1 Peter Gangl<br>2 Diana Jo Gangl                        |  | Case number (if know)                     |     |          |
|-----|--|--|---|-----|----------|
|     | Attn: Centralized Bankruptcy Po Box 20363                | When was the debt incurred?                                    | Opened 2/01/04 Last<br>Active 1/07/15     |     |          |
|     | Kansas City, MO 64195  Number Street City State Zlp Code | As of the date you file, the claim i                           | s: Check all that apply                   |     |          |
|     | Who incurred the debt? Check one.  ☐ Debtor 1 only       | ☐ Contingent   |   |     |          |
|     | ☐ Debtor 2 only  | ☐ Unliquidated   |   |     |          |
|     | Debtor 1 and Debtor 2 only                               | ☐ Disputed   |   |     |          |
|     | ☐ At least one of the debtors and another                | Type of NONPRIORITY unsecured                                  | d claim:                                  |     |          |
|     | ☐ Check if this claim is for a community debt            | ☐ Student loans  |   |     |          |
|     | Is the claim subject to offset?                          | ☐ Obligations arising out of a sepa                            | aration agreement or divorce that you did |     |          |
|     | ■ No   | Debts to pension or profit-sharin                              | g plans, and other similar debts          |     |          |
|     | Yes  | Other. Specify Credit  | t Card                                    |     |          |
| 4.6 | Discover Fin Svcs Llc                                    | Last 4 digits of account number                                | 8317                                      | \$  | 7,084.00 |
|     | Nonpriority Creditor's Name                              | Ū  |   | · — |          |
|     | Po Box 15316<br>Wilmington, DE 19850                     | When was the debt incurred?                                    | Opened 6/01/03 Last<br>Active 3/04/15     |     |          |
|     | Number Street City State Zlp Code                        | As of the date you file, the claim i                           | s: Check all that apply                   |     |          |
|     | Who incurred the debt? Check one.  ☐ Debtor 1 only       | ☐ Contingent   |   |     |          |
|     | ☐ Debtor 2 only  | ☐ Unliquidated   |   |     |          |
|     | ■ Debtor 1 and Debtor 2 only                             | ☐ Disputed   |   |     |          |
|     | ☐ At least one of the debtors and another                | Type of NONPRIORITY unsecured                                  | d claim:                                  |     |          |
|     | ☐ Check if this claim is for a community debt            | ☐ Student loans  |   |     |          |
|     | Is the claim subject to offset?                          | Obligations arising out of a sepanot report as priority claims | aration agreement or divorce that you did |     |          |
|     | ■ No   | Debts to pension or profit-sharing                             | g plans, and other similar debts          |     |          |
|     | Yes  | Other. Specify Credit  | t Card                                    |     |          |
| 4.7 | Discover Fin Svcs Llc                                    | Last 4 digits of account number                                | 0764                                      | \$  | 8,442.00 |
|     | Nonpriority Creditor's Name                              | -  |   |     |          |
|     | Po Box 15316<br>Wilmington, DE 19850                     | When was the debt incurred?                                    | Opened 4/01/06 Last<br>Active 3/17/15     |     |          |
|     | Number Street City State Zlp Code                        | As of the date you file, the claim i                           | s: Check all that apply                   |     |          |

Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main Page 22 of 47 Document Debtor 1 **Peter Gangl** Debtor 2 Diana Jo Gangl Case number (if know) Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.8 **GECRB/Sams Club** 9,401.00 Last 4 digits of account number 6611 \$ Nonpriority Creditor's Name Gecrb/Sams Club Opened 11/01/08 Last Po Box 103104 When was the debt incurred? Active 1/05/15 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.9 176.00 Pellettieri 9980 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

4.10 Us Bank

Nonpriority Creditor's Name

☐ Yes

Last 4 digits of account number

Other. Specify

8500

Medical

22,121.00

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| Debtor 2           | Peter Gar<br>Diana Jo              |                                   |   | age 2      | Case n      | umber (if know)  |           |                    |
|--------------------|------------------------------------|-----------------------------------|---|------------|-------------|--|-----------|--------------------|
|                    | Po Box 108                         |                                   | When was the debt incurre   | ed?        |             | d 3/01/75 Last<br>12/08/14   |           |                    |
|                    | St Louis, M<br>Number Street       | City State Zlp Code               | As of the date you file, the  | claim is   | : Check all | that apply   |           |                    |
|                    | _                                  | the debt? Check one.              | ☐ Contingent  |            |             |  |           |                    |
|                    | ☐ Debtor 1 on                      | •                                 | ☐ Unliquidated  |            |             |  |           |                    |
|                    | Debtor 1 and                       | d Debtor 2 only                   | ☐ Disputed  |            |             |  |           |                    |
|                    | ☐ At least one                     | of the debtors and another        | Type of NONPRIORITY uns   | secured    | claim:      |  |           |                    |
|                    | ☐ Check if thi debt                | s claim is for a community        | ☐ Student loans   |            |             |  |           |                    |
|                    | Is the claim su                    | bject to offset?                  | ☐ Obligations arising out of not report as priority claims                | a separa   | ation agree | ment or divorce that you did   |           |                    |
|                    | ■ No                               |                                   | ☐ Debts to pension or profit  | t-sharing  | plans, and  | other similar debts  |           |                    |
|                    | ☐ Yes                              |                                   | ■ Other. Specify  | Credit     | Card        |  | -         |                    |
|                    | Us Dept Of                         | •                                 | Last 4 digits of account nu   | mber       | 8581        |  | \$        | 33,915.00          |
|                    | Po Box 786 Madison, W              | 60                                | When was the debt incurre   | ed?        |             | d 8/01/11 Last<br>2/04/15  |           |                    |
|                    |                                    | City State Zlp Code               | As of the date you file, the  | claim is   | : Check all | that apply   |           |                    |
|                    | Who incurred t                     | the debt? Check one.              | ☐ Contingent  |            |             |  |           |                    |
|                    | Debtor 1 on                        | ly                                | · ·   |            |             |  |           |                    |
|                    | Debtor 2 on                        | ly                                | ☐ Unliquidated  |            |             |  |           |                    |
|                    | ☐ Debtor 1 and                     | d Debtor 2 only                   | ☐ Disputed  |            |             |  |           |                    |
|                    | ☐ At least one                     | of the debtors and another        | Type of NONPRIORITY uns   | secured    | claim:      |  |           |                    |
|                    | ☐ Check if thi                     | s claim is for a community        | Student loans   |            |             |  |           |                    |
|                    |                                    | bject to offset?                  | ☐ Obligations arising out of not report as priority claims                | a separa   | ation agree | ment or divorce that you did   |           |                    |
|                    | ■ No                               |                                   | ☐ Debts to pension or profit  | t-sharing  | plans, and  | other similar debts  |           |                    |
|                    | ☐ Yes                              |                                   | Other. Specify  |            |             |  |           |                    |
|                    |                                    |                                   | E   | Educat     | ional       |  |           |                    |
| Part 3:            | List Other                         | s to Be Notified About a De       | bt That You Already Listed  | ł          |             |  |           |                    |
| trying t<br>more t | to collect from<br>han one credite | you for a debt you owe to some    | eone else, list the original credi<br>listed in Parts 1 or 2, list the ad | itor in Pa | arts 1 or 2 | listed in Parts 1 or 2. For example,<br>then list the collection agency her<br>here. If you do not have additional | e. Simila | rly, if you have   |
| Name a             | and Address<br>:-                  | 3                                 | On which entry in Part 1 Line of (Check one):                             |            | Part 1: 0   | ou list the original creditor?<br>Creditors with Priority Unsecu<br>Creditors with Nonpriority Uns                 |           |                    |
|                    |                                    |                                   | Last 4 digits of account r  |            |             | preditors with Nonphonty on  | ecui ec   | 1 Olali 113        |
| Part 4:            | Add the A                          | mounts for Each Type of U         | nsecured Claim  |            |             |  |           |                    |
| 6. Total tl        | _                                  |                                   |   | istical re | eporting p  | urposes only. 28 U.S.C. §159. Add t  | he amou   | ints for each type |
|                    | 6a.                                | Domestic support obligations      | 3   |            | 6a.         | Total claim  \$ 0.00   | _         |                    |
| Total cla          |                                    | Taxes and certain other debts     | s you owe the government  |            | 6b.         | \$ 0.00  |           |                    |
|                    | 6c.                                |                                   | injury while you were intoxicat   | ed         | 6c.         | \$ 0.00  | _         |                    |
|                    | 6d.                                | Other. Add all other priority uns | secured claims. Write that amoun  | nt here.   | 6d.         | \$ 0.00  | -         |                    |

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**Peter Gangl** Debtor 1 Debtor 2 Diana Jo Gangl Case number (if know) Total. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f. Student loans 6f. 33,915.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that you 0.00 6g. did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. 90,561.00 Total. Add lines 6f through 6i. 6j. 124,476.00 Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main

Page 25 of 47 Document Fill in this information to identify your case: Debtor 1 **Peter Gangl** Middle Name Last Name First Name Debtor 2 Diana Jo Gangl (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | whom you have the or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | _                                       |
| 2.2 | •         |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | _                                       |
| 2.3 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | _                                       |
| 2.4 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     | Number    | Street       |   |                   |   |
|     | City      |              | State   | ZIP Code          | _                                       |
| 2.5 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | _                                       |

|                            | Case 15-42455 L  | Decrees                       |                           | 12/1//15 10.30.1                                    | 5 Desciviani   |
|----------------------------|--|-------------------------------|---------------------------|---|--|
| =::: 41:                   |  | Docume                        | nt Page 26 o              | 147   |  |
| Fill in this               | information to identify your   | case:                         |                           |   |  |
| Debtor 1                   | Peter Gangl  |                               |                           |   |  |
|                            | First Name   | Middle Name                   | Last Name                 |   |  |
| Debtor 2                   | Diana Jo Gangl   |                               |                           |   |  |
| (Spouse if, fili           | ng) First Name   | Middle Name                   | Last Name                 |   |  |
| United Sta                 | ites Bankruptcy Court for the:   | NORTHERN DISTRICT             | OF ILLINOIS               |   |  |
| Case num                   | her  |                               |                           |   |  |
| (if known)                 |  |                               |                           |   | ☐ Check if this is an amended filing   |
|                            | l Form 106H<br>Iule H: Your Cod  | ebtors                        |                           |   | 12/15  |
| ill it out, a              |  | boxes on the left. Attach     | the Additional Page t     |   | eded, copy the Additional Page,<br>of any Additional Pages, write                                      |
| 1. Do                      | you have any codebtors? (If  | you are filing a joint case,  | do not list either spouse | as a codebtor.                                      |  |
| ■ No                       |  |                               |                           |   |  |
| ☐ Yes                      | 3  |                               |                           |   |  |
|                            | hin the last 8 years, have you<br>na, California, Idaho, Louisiana,            |                               |                           |   | states and territories include   |
| ■ No.                      | . Go to line 3.  |                               |                           |   |  |
| ☐ Yes                      | s. Did your spouse, former spouse  | use, or legal equivalent live | e with you at the time?   |   |  |
| in line<br>Form<br>fill ou | e 2 again as a codebtor only i<br>106D), Schedule E/F (Official<br>t Column 2. | f that person is a guaran     | tor or cosigner. Make     | sure you have listed the<br>06G). Use Schedule D, S | with you. List the person shown<br>e creditor on Schedule D (Officia<br>Schedule E/F, or Schedule G to |
|                            | Column 1: Your codebtor Name, Number, Street, City, State and Zl               | P Code                        |                           | Column 2: The cred<br>Check all schedules           | itor to whom you owe the debt that apply:  |
| 3.1                        |  |                               |                           | ☐ Schedule D, line                                  |  |
|                            | Name   |                               |                           | ☐ Schedule E/F, lin                                 | e  |
|                            |  |                               |                           | ☐ Schedule G, line                                  |  |
| -                          | Number Ctreet  |                               |                           | _   |  |
|                            | Number Street<br>City  | State                         | ZIP Code                  |   |  |
|                            |  |                               |                           |   |  |
| 3.2                        |  |                               |                           | ☐ Schedule D, line                                  |  |
|                            | Name   |                               |                           | ☐ Schedule E/F, lin                                 | e  |
|                            |  |                               |                           | ☐ Schedule G. line                                  | <del></del>  |

Street

State

Number

City

ZIP Code

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| Fill in this informa            | ation to identify your case:                          |  |
|---------------------------------|---|--|
| Debtor 1                        | Peter Gangl   |  |
| Debtor 2<br>(Spouse, if filing) | Diana Jo Gangl  |  |
| United States Ba                | nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |  |
| Case number (If known)          |   | Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter |
| Official Fo                     | orm 106l  | 13 income as of the following date:  MM / DD/ YYYY                                 |

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | Describe Employment   |                      |   |   |
|-----|---|----------------------|---|---|
| 1.  | Fill in your employment information.                        |                      | Debtor 1                                  | Debtor 2 or non-filing spouse           |
|     | If you have more than one job,                              | Employment status    | ■ Employed                                | ■ Employed                              |
|     | attach a separate page with information about additional    | Employment status    | ☐ Not employed                            | ☐ Not employed                          |
|     | employers.  | Occupation           | Warehouse Laborer                         | Teacher Associate                       |
|     | Include part-time, seasonal, or self-employed work.         | Employer's name      | G & O Thermal Supply                      | Glenview Community Consolidated SD #134 |
|     | Occupation may include student or homemaker, if it applies. | Employer's address   | 5435 N Northwest Hwy<br>Chicago, IL 60630 | 1401 Greenwood Rd<br>Glenview, IL 60025 |
|     |   | How long employed to | here? 2 Years                             | 10 Years                                |

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 1,679.12 2,093.87 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 2.093.87 1.679.12

Official Form 106I Schedule I: Your Income page 1

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| Deb<br>Deb | tor 1<br>tor 2              | Peter Gangl<br>Diana Jo Gangl   | _                 | C  | Case n               | umber ( <i>if l</i> | known)   |                    |                        |  |                 |
|------------|-----------------------------|---|-------------------|----|----------------------|---------------------|--|--------------------|------------------------|--|-----------------|
|            | 0                           | orthog Albana   |                   |    |                      | Debtor 1            |  |                    | or Debtor<br>on-filing | spouse                                       |                 |
|            | Cop                         | y line 4 here   | 4.                |    | \$                   | 2,09                | 3.87   | \$                 | 1                      | ,679.12                                      | =               |
| 5.         | List                        | all payroll deductions:   |                   |    |                      |                     |  |                    |                        |  |                 |
|            | 5a.                         | Tax, Medicare, and Social Security deductions   | 5a.               |    | \$                   | 14                  | 5.30   | \$                 |                        | 271.31                                       |                 |
|            | 5b.                         | Mandatory contributions for retirement plans  | 5b.               |    | \$                   |                     | 0.00   | \$                 |                        | 75.55  | -               |
|            | 5c.                         | Voluntary contributions for retirement plans  | 5c.               |    | \$                   | 4                   | 3.33   | \$                 |                        | 0.00   | _               |
|            | 5d.                         | Required repayments of retirement fund loans  | 5d.               |    | \$                   |                     | 0.00   | \$                 |                        | 0.00   | _               |
|            | 5e.<br>5f.                  | Insurance Domestic support obligations  | 5e.<br>5f.        |    | \$<br>_              |                     | 1.60   | \$<br>\$           |                        | 521.04                                       | _               |
|            | 51.<br>5g.                  | Union dues  | 5i.<br>5g.        |    | \$<br>               |                     | 0.00<br>0.00   | Ф<br>Ф             |                        | 0.00<br>45.89                                | _               |
|            | 5h.                         | Other deductions. Specify:  | 5g.<br>5h.        |    | <b>\$</b> —          |                     | 0.00   | + \$               |                        | 0.00   | _               |
| 6.         | Add                         | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.                |    | \$                   |                     | 0.23   | \$                 |                        | 913.79                                       | =               |
| 7.         |                             | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.                |    | \$                   |                     | 3.64   | \$                 |                        | 765.33                                       | =               |
| 8.         | 8b. 8c. 8d. 8e. 8f. 8g. 8h. | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filling spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify: | 8c.<br>8d.<br>8e. |    | \$<br>\$<br>\$<br>\$ |                     | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | \$\$ \$\$\$<br>+ _ |                        | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | -<br>-<br>-     |
| 9.         | Add                         | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.                | 9  | <b>_</b>             |                     | 0.00   | \$                 |                        | 0.0  | 0               |
| 10.        | Cald                        | culate monthly income. Add line 7 + line 9.   | 10.               | \$ | 1                    | ,733.64             | + \$   |                    | 765.33                 | = \$   | 2,498.97        |
|            |                             | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |                   |    |                      | ,                   | 1 L  |                    |                        |  | ,               |
| 11.        | Inclu<br>othe<br>Do r       | te all other regular contributions to the expenses that you list in <i>Schedu</i> ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are notify:  | ur depe           |    |                      | •                   |  | •                  | in <i>Schedu</i>       | le J.<br>+\$                                 | 0.00            |
| 12.        |                             | the amount in the last column of line 10 to the amount in line 11. The re that amount on the Summary of Schedules and Statistical Summary of Certies  |                   |    |                      |                     |  |                    |                        | \$   | 2,498.97        |
| 13.        | Do y                        | you expect an increase or decrease within the year after you file this form No. Yes. Explain:   | m?                |    |                      |                     |  |                    |                        |  | ned<br>y income |

Official Form 106I Schedule I: Your Income page 2

| Fill | in this informa                              | ation to identify yo                                      | our case:             |   |  |                                    |                                     |  |           |
|------|--|---|-----------------------|---|--|------------------------------------|-------------------------------------|--|-----------|
| Deb  | tor 1  | Peter Gangl   |                       |   |  | Ch                                 | eck if this is:                     |  |           |
|      | tor 2  | Diana Jo Ga   | ngl                   |   |  |                                    |                                     | ling<br>showing postpetition chapt<br>s of the following date: | :er       |
| ` '  | ouse, if filing)                             |   |                       |   |  |                                    |                                     |  |           |
| Unit | ed States Bankr                              | uptcy Court for the:                                      | NORTH                 | IERN DISTRICT OF ILLIN                            | IOIS   |                                    | MM / DD / YYY                       | Υ  |           |
|      | e number<br>nown)                            |   |                       |   |  |                                    |                                     |  |           |
| Of   | fficial Fo                                   | rm 106J   |                       |   |  |                                    |                                     |  |           |
|      |  | J: Your   |                       |   |  |                                    |                                     |  | 2/15      |
| info | rmation. If m                                |   | eded, atta            | ch another sheet to this                          |  |                                    |                                     | ble for supplying correct<br>rite your name and case           |           |
| Par  |  | ibe Your House  | hold                  |   |  |                                    |                                     |  |           |
| 1.   | Is this a join                               |   |                       |   |  |                                    |                                     |  |           |
|      | ☐ No. Go to                                  |   | in a separ            | ate household?                                    |  |                                    |                                     |  |           |
|      | 00. <b>2</b> 0                               |   | ч оори.               |   |  |                                    |                                     |  |           |
|      |  | -   | st file Offic         | ial Form 106J-2, Expense                          | s for Separate Hous                              | sehold of De                       | ebtor 2.                            |  |           |
| 2.   | Do you have                                  | e dependents?   | □ No                  |   |  |                                    |                                     |  |           |
|      | Do not list D<br>and Debtor 2                |   | ■ Yes.                | Fill out this information for each dependent      | Dependent's relat<br>Debtor 1 or Debto           |                                    | Dependent's age                     | Does dependent live with you?                                  |           |
|      | Do not state                                 |   |                       |   | Downleton  |                                    | 20                                  | □ No   |           |
|      | dependents                                   | names.  |                       |   | Daughter   |                                    |                                     |  |           |
|      |  |   |                       |   |  |                                    |                                     | ☐ Yes  |           |
|      |  |   |                       |   |  |                                    |                                     | □ No   |           |
|      |  |   |                       |   |  |                                    |                                     | Pyes   |           |
|      |  |   |                       |   |  |                                    |                                     | □ No<br>□ Yes  |           |
| 3.   | Do your exp                                  | enses include   |                       | No  |  |                                    |                                     | Lifes  |           |
|      |  | f people other to<br>d your depende                       | han $_{\square}$      | Yes   |  |                                    |                                     |  |           |
| exp  | imate your ex                                | ate Your Ongoi<br>openses as of you<br>a date after the I | our bankr             | uptcy filing date unless                          | you are using this t<br>plemental <i>Schedul</i> | form as a s<br>le <i>J</i> , check | supplement in a<br>the box at the t | Chapter 13 case to repo<br>op of the form and fill in          | rt<br>the |
| the  | ude expense<br>value of suc<br>icial Form 10 | h assistance an   | non-cash<br>d have in | government assistance cluded it on Schedule I:    | if you know<br>Yo <i>ur Incom</i> e              |                                    | Your                                | expenses   |           |
| (011 | iciai Foilli it                              | ,oi.,   |                       |   |  |                                    |                                     | ол <b>р</b> опосо  |           |
| 4.   |  | or home owners<br>and any rent for the                    |                       | ses for your residence.<br>or lot.                | Include first mortgag                            | ge<br>4.                           | \$                                  | 600.00   |           |
|      | If not include                               | led in line 4:  |                       |   |  |                                    |                                     |  |           |
|      | 4a. Real                                     | estate taxes  |                       |   |  | 4a.                                | \$                                  | 0.00   |           |
|      |  | rty, homeowner's  |                       |   |  | 4b.                                | · —                                 | 50.00  |           |
|      |  |   |                       | upkeep expenses                                   |  | 4c.                                | ·                                   | 0.00   |           |
| 5.   |  | owner's associat  |                       | dominium dues<br><b>our residence,</b> such as ho | ome equity loans                                 | 4d.<br>5.                          |                                     | 0.00<br>0.00   |           |

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| Debtor 1             | Peter Ga       | •  |                                |                      |
|----------------------|----------------|--|--------------------------------|----------------------|
| Debtor 2             | Diana Jo       | Gangl  | Case number (if known)         |                      |
| 1 14:1               | ities:         |  |                                |                      |
| . <b>Util</b><br>6a. |                | heat, natural gas  | 6a. \$                         | 120.00               |
| 6b.                  | -              | wer, garbage collection  | 6b. \$                         | 30.00                |
| 6c.                  | -              | e, cell phone, Internet, satellite, and cable services                             | 6c. \$                         | 150.00               |
| 6d.                  | Other. Spe     |  | 6d. \$                         | 0.00                 |
|                      |                | ekeeping supplies  | 7. \$                          | 600.00               |
|                      |                | hildren's education costs  | 8. \$                          | 0.00                 |
| _                    |                | ry, and dry cleaning   | 9. \$                          | 59.00                |
|                      |                | products and services  | 10. \$                         | 100.00               |
|                      |                | ntal expenses  | 11. \$                         | 150.00               |
|                      |                | Include gas, maintenance, bus or train fare.                                       |                                |                      |
|                      | not include c  |  | 12. \$                         | 500.00               |
|                      |                | clubs, recreation, newspapers, magazines, and boo                                  | ks 13. \$                      | 0.00                 |
| . Cha                | aritable cont  | ributions and religious donations  | 14. \$                         | 40.00                |
| . Insi               | urance.        |  |                                |                      |
| Do                   | not include in | surance deducted from your pay or included in lines 4                              |                                |                      |
|                      | . Life insura  |  | 15a. \$                        | 0.00                 |
| 15b                  | . Health ins   | urance   | 15b. \$                        | 0.00                 |
| 15c                  | . Vehicle in:  | surance  | 15c. \$                        | 99.00                |
| 15d                  | . Other insu   | rance. Specify:  | 15d. \$                        | 0.00                 |
| 6. <b>Tax</b>        | es. Do not in  | clude taxes deducted from your pay or included in lines                            | 4 or 20.                       |                      |
|                      | cify:          |  | 16. \$                         | 0.00                 |
|                      |                | ease payments:   |                                |                      |
|                      |                | ents for Vehicle 1   | 17a. \$                        | 0.00                 |
|                      |                | ents for Vehicle 2   | 17b. \$                        | 0.00                 |
|                      | . Other. Spe   | ·  |                                | 0.00                 |
|                      | . Other. Spe   | •  | 17d. \$                        | 0.00                 |
|                      |                | of alimony, maintenance, and support that you did                                  |                                | 0.00                 |
|                      |                | your pay on line 5, Schedule I, Your Income (Officia                               |                                |                      |
|                      |                | s you make to support others who do not live with y                                | 9                              | 0.00                 |
|                      | cify:          | erty expenses not included in lines 4 or 5 of this for                             |                                |                      |
|                      |                | s on other property  | 20a. \$                        | 0.00                 |
|                      | . Real estat   |  | 20b. \$                        | 0.00                 |
|                      |                | nomeowner's, or renter's insurance   | 20c. \$                        | 0.00                 |
|                      |                | ice, repair, and upkeep expenses   | 20d. \$                        | 0.00                 |
|                      |                | er's association or condominium dues   | 20e. \$                        | 0.00                 |
|                      | er: Specify:   | ci 3 association of condominant ducs   | 21. +\$                        | 0.00                 |
| . Oth                | er. Specily.   |  | Ζ1. +φ                         | 0.00                 |
| 2. Cal               | culate your    | monthly expenses   |                                |                      |
|                      | . Add lines 4  |  | \$                             | 2,498.00             |
| 22b                  | . Copy line 2  | 2 (monthly expenses for Debtor 2), if any, from Official                           | Form 106J-2 \$                 |                      |
| 22c                  | . Add line 22  | a and 22b. The result is your monthly expenses.                                    | \$                             | 2,498.00             |
|                      |                | •  | ·                              | _,                   |
|                      |                | monthly net income.  |                                |                      |
|                      |                | 12 (your combined monthly income) from Schedule I.                                 | 23a. \$                        | 2,498.97             |
| 23b                  | . Copy your    | monthly expenses from line 22c above.  | 23b\$                          | 2,498.00             |
| 22-                  | Cubtract       | our monthly evenence from your monthly income                                      |                                |                      |
| 230                  |                | our monthly expenses from your monthly income. is your <i>monthly net income</i> . | 23c. \$                        | 0.97                 |
|                      | THE TESUIL     | is your monuny her moonie.   |                                |                      |
| 4. <b>Do</b>         | you expect a   | an increase or decrease in your expenses within the                                | year after you file this form? |                      |
| For                  | example, do yo | u expect to finish paying for your car loan within the year or do y                |                                | ecrease because of a |
|                      |                | terms of your mortgage?  |                                |                      |
|                      | No.            |  |                                |                      |
|                      | Yes.           | Explain here:  |                                |                      |

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| Fill in this infor     | mation to identify your  | case:             |             |                                      |
|------------------------|--------------------------|-------------------|-------------|--------------------------------------|
| Debtor 1               | Peter Gangl              |                   |             |                                      |
|                        | First Name               | Middle Name       | Last Name   |                                      |
| Debtor 2               | Diana Jo Gangl           |                   |             |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name   |                                      |
|                        | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                                      |
| Case number (if known) |                          |                   |             | ☐ Check if this is an amended filing |

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

|            | Sign Below  |      |   |
|------------|---|------|---|
| Did yo     | ou pay or agree to pay someone who is NOT an attorney to  | help | you fill out bankruptcy forms?  |
| <b>■</b> N | lo  |      |   |
| □ Y        | Yes. Name of person   |      | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| that th    | penalty of perjury, I declare that I have read the summary a<br>ey are true and correct.<br>' Peter Gangl |      | chedules filed with this declaration and  /s/ Diana Jo Gangl                                    |
|            | eter Gangl  |      | Diana Jo Gangl  |
| Siç        | gnature of Debtor 1   |      | Signature of Debtor 2   |
| Da         | December 17, 2015   |      | Date December 17, 2015  |

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| Fill                | in this inform                                | nation to identify you                     | r case:   |   |  |   |
|---------------------|---|--|---|---|--|---|
|                     | otor 1  | Peter Gangl                                |   |   |  |   |
|                     |   | First Name                                 | Middle Name   | Last Name   |  |   |
|                     | otor 2  | Diana Jo Gangl First Name                  | Middle Neme   | Lost Nama   |  |   |
|                     | use if, filing)                               |  | Middle Name   | Last Name   |  |   |
| Unit                | ted States Ba                                 | nkruptcy Court for the:                    | NORTHERN DISTRICT C   | OF ILLINOIS   |  |   |
|                     | se numberown)                                 |  |   |   | _  | check if this is an mended filing                     |
| Sta<br>Be a<br>info | s complete a                                  | of Financial                               | , attach a separate sheet to  | are filing together, both are                         | ankruptcy<br>equally responsible for sup<br>y additional pages, write yo |   |
|                     |   | , , , , ,                                  | stion.<br>arital Status and Where You   | ı Lived Before  |  |   |
| 1.                  | What is you                                   | r current marital statu                    | ıs?   |   |  |   |
|                     | <ul><li>■ Married</li><li>□ Not man</li></ul> | rried                                      |   |   |  |   |
| 2.                  | During the I                                  | ast 3 years, have you                      | lived anywhere other than   | where you live now?                                   |  |   |
|                     | ■ No □ Yes. Lis                               | st all of the places you                   | lived in the last 3 years. Do no  | ot include where you live nov                         | v.   |   |
|                     | Debtor 1 Pr                                   | ior Address:                               | Dates Debtor 1 lived there  | Debtor 2 Prior Ad                                     | dress:   | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>state  |   |  |   |   | nity property state or territor ico, Texas, Washington and V             |   |
|                     | ■ No<br>□ Yes. Ma                             | ake sure you fill out <i>Sc</i>            | hedule H: Your Codebtors (O   | fficial Form 106H).                                   |  |   |
| Par                 | t 2 Explai                                    | n the Sources of You                       | ır Income   |   |  |   |
| 4.                  | Fill in the tota                              | al amount of income yo                     | mployment or from operating ou received from all jobs and a have income that you receiv | all businesses, including par                         |  | ndar years?   |
|                     | □ No ■ Yes. Fil                               | I in the details.                          |   |   |  |   |
|                     |   |  | Debtor 1  |   | Debtor 2   |   |
|                     |   |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                               | Gross income<br>(before deductions<br>and exclusions) |
|                     |   | of current year until<br>d for bankruptcy: | ■ Wages, commissions, bonuses, tips   | \$24,160.00   | ■ Wages, commissions, bonuses, tips                                      | \$17,050.00   |
|                     |   |  | ☐ Operating a business  |   | ☐ Operating a business   |   |

Official Form 107

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| Debtor 1<br>Debtor 2 | Peter Gangl<br>Diana Jo Gar          | ngl              | Case number (if known)  |   |  |                          |   |
|----------------------|--------------------------------------|------------------|---|---|--|--------------------------|---|
|                      |                                      | D                | ebtor 1   |   | Debtor 2                                       |                          |   |
|                      |                                      | Sc               | ources of income<br>neck all that apply.  | Gross income<br>(before deductions and<br>exclusions)                                   | Sources of inco                                |                          | Gross income<br>(before deductions<br>and exclusions) |
|                      | calendar year:<br>1 to December 3    |                  | Wages, commissions, onuses, tips  | \$25,396.00   | ■ Wages, comr<br>bonuses, tips                 | nissions,                | \$15,000.00   |
|                      |                                      |                  | Operating a business  |   | ☐ Operating a b                                | usiness                  |   |
| For the o            | alendar year bef<br>1 to December 3  | 1 2012 \         | Wages, commissions, onuses, tips  | \$0.00  | ■ Wages, comr<br>bonuses, tips                 | nissions,                | \$18,904.00   |
|                      |                                      |                  | Operating a business  |   | ☐ Operating a b                                | usiness                  |   |
| List e               |                                      | ne gross income  |   | ou have income that you rec   | that you listed in lin                         | •                        | -   |
|                      |                                      | Sc               | ebtor 1<br>curces of income<br>escribe below                                    | Gross income<br>(before deductions and<br>exclusions)                                   | Debtor 2<br>Sources of inco<br>Describe below. | me                       | Gross income<br>(before deductions<br>and exclusions) |
|                      | alendar year bef<br>1 to December 3  |                  | nemployment   | \$7,674.00  |  |                          |   |
|                      |                                      | 40               | 1k Withdrawal   | \$27,501.00   |  |                          |   |
| Part 3:              |                                      |                  | de Before You Filed for   |   |  |                          |   |
| _                    | No. Neither De                       | btor 1 nor Debt  | ebts primarily consume<br>or 2 has primarily consu<br>sonal, family, or househo | umer debts. Consumer deb  | ts are defined in 11                           | U.S.C. § 10 <sup>-</sup> | 1(8) as "incurred by an                               |
|                      | •                                    | , ,              | ou filed for bankruptcy, di   | id you pay any creditor a tota  | al of \$6,225* or mor                          | e?                       |   |
|                      | □ <sub>No.</sub><br>□ <sub>Yes</sub> | paid that credit |   | id a total of \$6,225* or more<br>nts for domestic support obli<br>his bankruptcy case. |  |                          |   |
|                      | * Subject t                          | o adjustment on  | 4/01/16 and every 3 year  | s after that for cases filed or   | n or after the date of                         | adjustment               |   |
|                      |                                      |                  | oth have primarily consurou filed for bankruptcy, di                            | umer debts. id you pay any creditor a tota  | al of \$600 or more?                           |                          |   |
|                      | ■ No.                                | Go to line 7.    |   |   |  |                          |   |
|                      | □ <sub>Yes</sub>                     | include paymer   |   | id a total of \$600 or more an<br>bligations, such as child sup                         |  |                          |   |
| Cred                 | ditor's Name and                     | Address          | Dates of payme  | nt Total amount paid  | Amount you still owe                           | Was this p               | ayment for  |

Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Page 34 of 47 Document Debtor 1 Peter Gangl Debtor 2 Diana Jo Gangl Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider **Insider's Name and Address** Total amount Reason for this payment Dates of payment Amount you paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment Total amount Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number JP Morgan Chase Bank v. Debtors **Foreclosure Cook County Circuit Court** □ Pending 2014 CH 9624 50 W Washington St □ On appeal Chicago, IL 60602 Concluded **Small Claims** Citibank NA v. Debtor Cook County Courthouse Pending 15 M2 004563 5600 Old Orchard Rd □ On appeal **Room 135** □ Concluded Skokie, IL 60077 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Nο Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was **Amount** 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

☐ Yes

Nο

court-appointed receiver, a custodian, or another official?

Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main Document Page 35 of 47 Peter Gangl Debtor 1 Debtor 2 Diana Jo Gangl Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Law Offices of Tom O'Brien **Attorney Fees** December \$1,470.00 950 Main Street 2015 Antioch, IL 60002 Antioch, IL 60002

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

NoYes. Fill in the details.

tom@tomobrienlaw.com

Person Who Was Paid

Description and value of any property
Address

Date payment
or transfer was
payment
made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

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| Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which beneficiary? (These are often called asset-protection devices.)  Nome of trust  Person's Fill in the details.  Name of trust  Description and value of the property transferred  Date Tr made  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Uthin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your bene sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions.  Nome of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Yes, Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes, Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes, Fill in the details.  Name of Storage Facility  Who else has or had access  Describe the contents  Do you filed for bankruptcy  |  |
|--|--|
| Person Who Received Transfer Address Person's relationship to you  19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which beneficiary? (These are often called asset-protection devices.)  No   |  |
| 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which beneficiary? (These are often called asset-protection devices.)    No  | transfer was                               |
| beneficiary? (These are often called asset-protection devices.)  Name of trust  Description and value of the property transferred  Date Tr made  Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your bene sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of instrument closed, sold, moved, or transferred  Capital One Bank  XXXX-XXXX  Checking  December 2013  Capital One Bank  XXXX-XXXXX  Checking  December 2013  December 2013  December 2013  December 2013  Describe the contents  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or ho for someone.   |  |
| Date Tr made   | :h you are a                               |
| Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your bene sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions.    No   | <b>-</b>                                   |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your bene sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes, Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Capital One Bank  XXXX-xxxx  Last 4 digits of account or instrument closed, sold, moved, or transferred  December 2013  Capital One Bank  XXXX-xxxx  Checking Savings Money Market Brokerage Other Crash, or other valuables?  No Yes, Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP C | Transfer was                               |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your bene sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes, Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Capital One Bank  XXXX-xxxx  Last 4 digits of account or instrument closed, sold, moved, or transferred  December 2013  Capital One Bank  XXXX-xxxx  Checking Savings Money Market Brokerage Other Crash, or other valuables?  No Yes, Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP C |  |
| Address (Number, Street, City, State and ZIP   account number   instrument   closed, sold, moved, or transferred    Capital One Bank   XXXX-xxxx   Checking   Savings   Money Market   Brokerage   Other_    21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for cash, or other valuables?  No   Yes. Fill in the details.   Name of Financial Institution   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)    No   Yes. Fill in the details.   Name of Storage Facility   Address (Number, Street, City, State and ZIP Code)   Describe the contents   Do y Address (Number, Street, City, State and ZIP Code)    No   Yes. Fill in the details.   Name of Storage Facility   Address (Number, Street, City, State and ZIP Code)   Describe the contents   Do y Address (Number, Street, City, State and ZIP Code)   Describe the contents   Do y Address (Number, Street, City, State and ZIP Code)   Describe the contents   Do y have   Describe the contents   Describe the co |  |
| Savings   Money Market   Brokerage   Other   | Last balance<br>ore closing or<br>transfer |
| No  ☐ Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No ☐ Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No ☐ Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Describe the contents  Do yu hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or ho for someone.  | \$0.00                                     |
| ☐ Yes. Fill in the details.         Name of Financial Institution       Who else had access to it?         Address (Number, Street, City, State and ZIP Code)       Address (Number, Street, City, State and ZIP Code)         22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy         ■ No       Yes. Fill in the details.         Name of Storage Facility       Who else has or had access to it?         Address (Number, Street, City, State and ZIP Code)       Who else has or had access to it?         Address (Number, Street, City, State and ZIP Code)       Describe the contents         Part 9: Identify Property You Hold or Control for Someone Else    23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hofor someone.   | r securities,                              |
| Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Do you have Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hofor someone.   |  |
| 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy  No □ Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hofor someone.  ■ Output Describe the contents of   | you still<br>ve it?                        |
| No     Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or ho for someone.   |  |
| Address (Number, Street, City, State and ZIP Code)  to it? Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or ho for someone.   |  |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or ho for someone.  | you still<br>ve it?                        |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or ho for someone.  |  |
| - NO   | nold in trust                              |
| ☐ Yes. Fill in the details.  |  |
| Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Describe the property Code)  | Value                                      |

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**Peter Gangl** Debtor 1 Diana Jo Gangl Debtor 2

Case number (if known)

| Part 10: | <b>Give Details</b> | <b>About</b> | <b>Environmental</b> | Information |
|----------|---------------------|--------------|----------------------|-------------|
|----------|---------------------|--------------|----------------------|-------------|

For the purpose of Part 10, the following definitions apply:

| Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or |
|--|
| toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or       |
| regulations controlling the cleanup of these substances, wastes, or material.  |

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

|  | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. |  |  |                                  |   |                    |  |
|--|---|--|--|----------------------------------|---|--------------------|--|
| Rep  | ort a   | II notices, releases, and proceedings th                       | at you know about, regardless of when                                      | n the                            | ey occurred.  |                    |  |
| 24.  | Has   | any governmental unit notified you tha                         | t you may be liable or potentially liable                                  | e un                             | der or in violation of an environn                            | nental law?        |  |
|  |   | No<br>Yes. Fill in the details.                                |  |                                  |   |                    |  |
|  |   | me of site dress (Number, Street, City, State and ZIP Code)    | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | d                                | Environmental law, if you know it                             | Date of notice     |  |
| 25.  | Hav   | re you notified any governmental unit of                       | any release of hazardous material?   |                                  |   |                    |  |
|  |   | No<br>Yes. Fill in the details.                                |  |                                  |   |                    |  |
|  |   | me of site<br>dress (Number, Street, City, State and ZIP Code) | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | d                                | Environmental law, if you know it                             | Date of notice     |  |
| 26.  | Hav   | re you been a party in any judicial or adr                     | ninistrative proceeding under any env                                      | iron                             | mental law? Include settlements                               | and orders.        |  |
|  |   | No<br>Yes. Fill in the details.                                |  |                                  |   |                    |  |
|  |   | se Title<br>se Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Na                               | ture of the case  | Status of the case |  |
| Pai  | t 11:   | Give Details About Your Business or                            | Connections to Any Business  |                                  |   |                    |  |
| 27.  | Witl  | hin 4 years before you filed for bankrup                       | cy, did you own a business or have ar                                      | ny o                             | f the following connections to an                             | y business?        |  |
|  |   | ■ A sole proprietor or self-employed i                         | n a trade, profession, or other activity,                                  | , eith                           | her full-time or part-time                                    |                    |  |
|  |   | ☐ A member of a limited liability comp                         | pany (LLC) or limited liability partnersh                                  | nip (                            | LLP)  |                    |  |
|  |   | ☐ A partner in a partnership                                   |  |                                  |   |                    |  |
|  |   | ☐ An officer, director, or managing ex                         | ecutive of a corporation   |                                  |   |                    |  |
| ☐ An owner of at least 5% of the voting or equity securities of a corporation    |   |  |  |                                  |   |                    |  |
| □ No. None of the above applies. Go to Part 12.                                  |   |  |  |                                  |   |                    |  |
| Yes. Check all that apply above and fill in the details below for each business. |   |  |  |                                  |   |                    |  |
|  | Ad  | siness Name<br>dress   | Describe the nature of the business  |                                  | Employer Identification number Do not include Social Security |                    |  |
|  | (Nui  | mber, Street, City, State and ZIP Code)                        | Name of accountant or bookkeeper   | Name of accountant or bookkeeper |   |                    |  |
|  |   | R4U2<br>me as debtor   | Ebay Sales   |                                  | EIN:<br>From-To 2003 - Present                                |                    |  |
|  |   |  |  |                                  | rioni-io 2003 - Present                                       |                    |  |

Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main Page 38 of 47 Document Debtor 1 **Peter Gangl** Diana Jo Gangl Debtor 2 Case number (if known) 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Peter Gangl /s/ Diana Jo Gangl **Peter Gangl** Diana Jo Gangl Signature of Debtor 1 Signature of Debtor 2 Date December 17, 2015 Date **December 17, 2015** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this inform                     | Fill in this information to identify your case: |                   |             |                                      |  |  |
|---|---|-------------------|-------------|--------------------------------------|--|--|
| Debtor 1                                | Peter Gangl                                     |                   |             |                                      |  |  |
|   | First Name                                      | Middle Name       | Last Name   |                                      |  |  |
| Debtor 2                                | Diana Jo Gangl                                  |                   |             |                                      |  |  |
| (Spouse if, filing)                     | First Name                                      | Middle Name       | Last Name   |                                      |  |  |
| United States Bankruptcy Court for the: |   | NORTHERN DISTRICT | OF ILLINOIS |                                      |  |  |
| Case number _ (if known)                |   |                   |             | ☐ Check if this is an amended filing |  |  |

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? Creditor's ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's □ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt:

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ No

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| B8 (F | Form 8) (12/08)  |   | Page 2                                   |
|-------|--|---|--|
| r     | name:  | □ Retain the property and redeem it.  | ☐ Yes                                    |
|       | Description of   | $\square$ Retain the property and enter into a  |  |
|       | Description of   | Reaffirmation Agreement.  |  |
|       | property<br>securing debt:   | ☐ Retain the property and [explain]:  |  |
|       | occurring door.  |   |  |
|       | t 2: List Your Unexpired Personal P  |   |  |
| in tł | ne information below. Do not list real e   | e that you listed in Schedule G: Executory Contracts and Une<br>estate leases. Unexpired leases are leases that are still in effe | ect; the lease period has not yet ended. |
| You   | may assume an unexpired personal p   | roperty lease if the trustee does not assume it. 11 U.S.C. § 30   | 65(p)(2).                                |
| Des   | scribe your unexpired personal proper  | ty leases   | Will the lease be assumed?               |
| Les   | ssor's name:   |   | □ No                                     |
|       | scription of leased  |   | _  |
| Pro   | pperty:  |   | ☐ Yes                                    |
|       | ssor's name:   |   | □ No                                     |
|       | scription of leased operty:  |   | ☐ Yes                                    |
| ا م   | ssor's name:   |   | □ No                                     |
|       | scription of leased  |   | □ NO                                     |
| _     | operty:  |   | ☐ Yes                                    |
|       | ssor's name:   |   | □ No                                     |
| _     | scription of leased operty:  |   | ☐ Yes                                    |
| Loc   | ssor's name:   |   |  |
|       | scription of leased  |   | □ No                                     |
| Pro   | operty:  |   | ☐ Yes                                    |
|       | ssor's name:   |   | □ No                                     |
|       | scription of leased<br>perty:  |   | ☐ Yes                                    |
| Les   | ssor's name:   |   | □ No                                     |
|       | scription of leased operty:  |   |  |
| 1 10  | porty.   |   | ☐ Yes                                    |
| Paı   | rt 3: Sign Below   |   |  |
|       | ler penalty of perjury, I declare that I happerty that is subject to an unexpired le | ave indicated my intention about any property of my estate thase.   | nat secures a debt and any personal      |
| X     | /s/ Peter Gangl  | χ /s/ Diana Jo Gangl  |  |
| •     | Peter Gangl  | Diana Jo Gangl  |  |
|       | Signature of Debtor 1  | Signature of Debtor 2   |  |
|       | Date December 17, 2015   | Date December 17, 2015  |  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-42455 Doc 1 Filed 12/17/15 Entered 12/17/15 10:30:15 Desc Main Document Page 45 of 47

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Northern District of Illinois

| In   | re  | Peter Gangl<br>Diana Jo Gangl   |  | Case No.   |                       |              |  |
|------|---|---|--|--|-----------------------|--------------|--|
|      | -   | Diana 30 Gangi  | Debtor(s)  | Chapter  | 7                     |              |  |
|      |   |   |  | _  |                       |              |  |
|      |   | DISCLOSURE OF COMPI   | ENSATION OF ATTOI  | RNEY FOR D   | EBTOR(S)              |              |  |
| 1.   | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |   |  |  |                       |              |  |
|      |   | For legal services, I have agreed to accept   |  | \$   | 1,000.00              |              |  |
|      |   | Prior to the filing of this statement I have received   |  |  | 1,000.00              |              |  |
|      |   | Balance Due   |  |  | 0.00                  |              |  |
| 2.   | \$  | 335.00 of the filing fee has been paid.   |  |  |                       |              |  |
| 3.   | The   | e source of the compensation paid to me was:  |  |  |                       |              |  |
|      |   | ■ Debtor □ Other (specify):   |  |  |                       |              |  |
| 4.   | The   | e source of compensation to be paid to me is:   |  |  |                       |              |  |
| +.   | 1110  | _   |  |  |                       |              |  |
|      |   | ■ Debtor □ Other (specify):   |  |  |                       |              |  |
| 5.   |   | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  |  |  |                       |              |  |
|      |   | I have agreed to share the above-disclosed compen-<br>copy of the agreement, together with a list of the n  |  |  |                       | law firm. A  |  |
| 6.   | In  | return for the above-disclosed fee, I have agreed to  | render legal service for all aspect  | s of the bankruptcy  | case, including:      |              |  |
|      | b.<br>c.  | Analysis of the debtor's financial situation, and ren<br>Preparation and filing of any petition, schedules, st<br>Representation of the debtor at the meeting of credi<br>[Other provisions as needed]  Negotiations with secured creditors to<br>reaffirmation agreements and applicat<br>522(f)(2)(A) for avoidance of liens on h | atement of affairs and plan which<br>itors and confirmation hearing, and<br>reduce to market value; ex-<br>ions as needed; preparation | n may be required;<br>and any adjourned he<br>emption planning | arings thereof;       | d filing of  |  |
| 7.   | Ву  | y agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.   |  |  |                       |              |  |
|      |   |   | CERTIFICATION  |  |                       |              |  |
| this |   | ertify that the foregoing is a complete statement of a kruptcy proceeding.  | ny agreement or arrangement for  | payment to me for  | representation of the | debtor(s) in |  |
|      | Dec   | ember 17, 2015  | /s/ Thomas C. O'I  | Brien  |                       |              |  |
|      | Date  |   | Thomas C. O'Brie   | en 2082322   |                       |              |  |
|      |   |   | Signature of Attorne Law Offices of To   |  |                       |              |  |
|      |   |   | 950 Main Street  | JIII O BIIEII  |                       |              |  |
|      |   |   | Antioch, IL 60002  | 2  |                       |              |  |
|      |   |   | 847-838-1100 Fa  | x: 847-838-1101  |                       |              |  |
|      |   |   | tom@tomobrienl   | aw.com   |                       |              |  |
|      |   |   | Name of law firm   |  |                       |              |  |

### **United States Bankruptcy Court** Northern District of Illinois

| In re | Peter Gangl<br>Diana Jo Gangl              |  | Case No.             |                           |  |
|-------|--|--|----------------------|---------------------------|--|
|       |  | Debtor(s)                                  | Chapter              | 7                         |  |
|       | VI   | ERIFICATION OF CREDITOR M.                 | ATRIX                |                           |  |
|       |  | Number of                                  | Number of Creditors: |                           |  |
|       | The above-named Debtor(s) (our) knowledge. | ) hereby verifies that the list of credito | ors is true and      | correct to the best of my |  |
| Date: | December 17, 2015                          | /s/ Peter Gangl                            |                      |                           |  |
|       |  | Peter Gangl                                |                      |                           |  |
|       |  | Signature of Debtor                        |                      |                           |  |
| Date: | December 17, 2015                          | /s/ Diana Jo Gangl                         |                      |                           |  |
|       |  | Diana Jo Gangl                             |                      |                           |  |
|       |  | Signature of Debtor                        |                      |                           |  |

Capital One Na Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card 201 N. Walnut St//De1-1027 Wilmington, DE 19801

Chase Mtg Po Box 24696 Columbus, OH 43224

Citibank Sd, Na Attn: Centralized Bankruptcy Po Box 20363 Kansas City, MO 64195

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

GECRB/Sams Club Gecrb/Sams Club Po Box 103104 Roswell, GA 30076

Pellettieri 991 Oak Creek Dr Lombard, IL 60148

Us Bank Po Box 108 St Louis, MO 63166

Us Dept Of Ed/glelsi Po Box 7860 Madison, WI 53707